File Original and First Copy with Department of Ecology Second Copy — Owner's Copy Third Copy — Driller's Copy

WATER WELL REPORT STATE OF WASHINGTON

(1) OWNER: Name PARE WOOD COMM, Club INC	Address BOX4A RT LANGLEY, WASL. 982
(2) LOCATION OF WELL: County TSLAND	
Bearing and distance from section or subdivision corner	
(A) PROPOSED HOE Water A. E. Martin E.	(10) WELL LOG:
(3) PROPOSED USE: Domestic X Industrial Municipal Irrigation Test Well Other	2-1
	Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.
(4) TYPE OF WORK: Owner's number of well (if more than one)	MATERIAL FROM TO
1966 New well Method; Dug 🗆 Bored 🗆	
Deepened 🗌 Cable 🗌 Driven 🔀	
Reconditioned Rotary Jetted	
(5) DIMENSIONS: Diameter of well inches.	
Drilled 25 ft. Depth of completed well 5.5 ft.	
Diffice Depth of complete	
(6) CONSTRUCTION DETAILS:	
Casing installed: 6 "Dlam. from O tt. to 95 tt.	
Threaded Diam. from ft. to ft.	<u> </u>
Welded W. Diam. from ft. to ft.	
Perforations: Yes No X	- Well log mor available
Type of perforator used	
perforations from ft. to ft.	
perforations from	
perforations from ft. to ft.	16 further information
C	
Screens: Yes X No - Cook	available.
Type Model No	
Diam. Slot size 4 from 5 ft. to 95 ft.	
Diam. Slot size from ft. to ft.	
Consult markets and the second	
Gravel placed from Size of gravel:	
- Gravel placed from	
Surface seal: Yes No To what depth? ft.	
Material used in seal	
Did any strata contain unusable water? Yes 🗍 No	497,
Type of water? Depth of strata Method of sealing strata off.	
<u> </u>	
(7) PUMP: Manufacturer's Name, Sta - Rute	
Type: Submissible H.P.	20000
(8) WATER LEVELS: Land-surface elevation above mean sea level.	
2.12.4	
Artesian pressure	
Artesian water is controlled by	
(Cap, valve, etc.)	
(9) WELL TESTS: Drawdown is amount water level is lowered below static level.	Work started 8 - 2.5 1966. Completed 8- 28 1966
Was a pump test made? Yes No If yes, by whom?	Work started
Yield: gal./min. with ft. drawdown after hrs.	WELL DRILLER'S STATEMENT:
0 0 0	This well was drilled under my jurisdiction and this report is
H H H	true to the best of my knowledge and belief.
Recovery data (time taken as zero when pump turned off) (water level	December
measured from well top to water level)	NAME DECERSED
Time Water Level Time Water Level Time Water Level	(Person, firm, or corporation) (Type or print)
	Address
Date of test	[Cimed]
Bailer testgal./min. withft. drawdown afterhrs.	[Signed](Well Driller)
Artesian flow g.p.m. Date	75.4. 10
Temperature of water	License No